Annual Credit Reports for Youth in Care REQUEST FOR INVESTIGATION

If you suspect that credit fraud or possible identity theft has occurred to one of your youth, please complete the "Request for Investigation" form and email or fax it to Chief Investigator Dale Liebherr at Dliebherr@ag.nv.gov or 775-684-1108. He is the assigned investigator for our credit report fraud. This is a result of Senate Bill 99 which passed in the 2013 Legislative Session.



OFFICE OF THE ATTORNEY GENERAL

100 North Carson Street Carson City, Nevada 89701-4717

REQUEST FOR INVESTIGATION

Date:	Complainant:			
Complainants Agency/Dep	partment:			
Phone:	Fax:	Em	nail:	
Alleged Suspect:		_		
Offense/Type of Investigat	ion/Inquiry:			
List by priority the work red	quested:			
				_
Please give synopsis of ca	nse:			
				_
	ATTACH ADDITIONAL INFOR	MATION IF NECES	SSARY	
NRS/NAC Violated:				
Time Constraints:				
Attorney General's Office Investigations Divisions U	se Only:			
Investigator assigned:			Date:	
Assigned by:		Title:		
ProLaw Case #:	Assigne	Assigned By:		Date: